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CONFIRMATION NO. 4555

<b>SERIAL NUMBER</b> 10/762,098	<b>FILING OR 371(c) DATE</b> 01/21/2004 <b>RULE</b>	<b>CLASS</b> 426	<b>GROUP ART UNIT</b> 1761	<b>ATTORNEY DOCKET NO.</b> 05533.0002.NPUS00	
<b>APPLICANTS</b> Linda Kalustian Lester, San Francisco, CA; Eleanor Chicolo, San Francisco, CA;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 04/24/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>H. P. C. W.</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 021971					
<b>TITLE</b> Savory gluten-free foods					
<b>FILING FEE RECEIVED</b> 482	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		